UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURTIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

134	S	229					
OMB AF	OMB APPROVAL						
OMB Number	3	3235-0076					
Expires:	Ma	y 31, 2005					
Estimated aver	an h	undon					

Estimated average burden hours per response ... 16.00

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

	UNIFOR	M LIMITED	OFFERING	EXEMPTI	ION	
Name of Offering (an amendment an	d name has cha	nged, and indic	ate change.)	
Filing Under (Check box(es)	that apply):	☐ Rule 504	Rule 505	☑ Rule 506	Section 4(6)	ULOES FRECEIVED OF
Type of Filing: New Fili	ng 🗌 An	nendment			·	
			IC IDENTIFIC	CATION DATA	<u> </u>	1/ NOV 1/ A 7005 2
1. Enter the information requ	ested about the	e issuer				
Name of Issuer (check if PARTNERS FOR GROWT		lment and name has	changed, and ind	icate change.)		185
Address of Executive Offices 180 Pacific Avenue, San	Francisco, C		Street, City, Sta	te, Zip Code)	Telephone 415-912-	e Number (Including Area Code) -5892
Address of Principal Business (if different from Executive Office	-	(Number and	Street, City, Sta	te, Zip Code)	Telephon	e Number (Including Aréa Code)
Brief Description of Business life sciences companies.		rship has been	organized to	make invest	ments in and ex	tend loans to technology and
T						PROCESSED
Type of Business Organizatio corporation		partnership, alread	dy formed		other (please spec	ify)
☐ business trust	☐ limited	partnership, to be	formed			DEC 0 2 2005
Actual or Estimated Date of I Jurisdiction of Incorporation	•	•	Month 09	Year 2005	☐ ☑ Actual	□ Est THO MSON V FINANCIAL
varisatetion of incorporation	or Organizatio	,		foreign jurisdic		DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee. There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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,		A. BASIC IDEN	TIFICATION DATA							
2. Enter the information requested for the following:										
 Each promoter of the 	ne issuer, if the is	suer has been organized	within the past five years;							
 Each beneficial ow securities of the iss 		ower to vote or dispose,	or direct the vote or dispo	siti6n of, 10% or	more of a class of equity					
• Each executive offi	cer and director o	of corporate issuers and o	of corporate general and m	anaging partners o	of partnership issuers; and					
Each general and m	anaging partner	of partnership issuers.								
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first Kahn, Andrew W.	, if individual)									
Business or Residence Addr 180 Pacific Avenue, Sar			ode)							
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first Campbell, Donald M.	, if individual)									
Business or Residence Addr 180 Pacific Avenue, Sar			ode)							
Check Box(es) that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first Nield, Lorraine	, if individual)									
Business or Residence Addr 180 Pacific Avenue, Sar			ode)							
Check Box(es) that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	⊠ General and/or Managing Partner					
Full Name (Last name first Georgatos, Jason	, if individual)									
Business or Residence Add 180 Pacific Avenue, Sar			ode)							
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	□ General and/or ■ Managing Partner					
Full Name (Last name first Partners for Growth II, I		-								
Business or Residence Add 180 Pacific Avenue, Sar			ode)							
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first SVB Financial Group	, if individual)			_						
Business or Residence Add 3000 Sand Hill Road, Bo			•							
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first	, if individual)									
Business or Residence Add	ress (Number and	d Street, City, State, Zip C	Code)							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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				B. 1	INFORMA	TION AB	OUT OF	ERING				
1. Has ti	he issuer so	ld, or does	the issuer i	ntend to sel	ll, to non-ac	credited in	ivestors in	this offering	g?		_	es No
			Ansv	er also in A	Appendix, (Column 2,	if filing un	der ULOE.				
2. What	is the minin	num invest					_				\$	50000
3. Does	the offering	g permit joi	int ownersh	ip of a sing	le unit?						Ye	
4. Enter	r the inforn	nation requ	ested for e	ach persor	who has	been or w	ill be paid	or given,	directly or	indirectly.	anv	
comn If a p state	nission or s person to be or states, li	imilar remelisted is a state the name	uneration fo an associate	or solicitati d person o ker or deal	on of purch r agent of a er. If more	asers in co a broker or e than five	onnection volue dealer reg	vith sales of fistered with ons to be lis	securities the SEC	in the offe and / or w	ring. rith a	
	(Last name		dividual)									
Business o	or Residence	e Address (Number an	d Street, C	ity, State, Z	ip Code)						
Name of A	Associated I	Broker or D	Dealer	<u></u>								
States in V	Vhich Perso	n Listed H	as Solicited	or Intends	to Solicit F	Purchasers					<u> </u>	
(Check	c "All State	s" or check	individual	States)							. 🗌 All	States ·
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	[SC]	[3D]	[114]	[1X]		[1 1]	[VA]	[WA]				[FK]
Full Name	(Last name	e first, if in	dividual)									
Business of	or Residence	e Address	(Number an	d Street, C	ity, State, Z	ip Code)						
Name of A	Associated I	Broker or I	Dealer							-		
States in V	Which Perso	on Listed H	las Solicited	or Intends	to Solicit I	Purchasers	<u> </u>			<u> </u>		
(Checl	k "All State	s" or check	individual	States)							. 🗌 All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Name	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business	or Residenc	e Address	(Number an	d Street, C	ity, State, Z	ip Code)						
Name of A	Associated I	Broker or I	Dealer			_				-		
States in V	Which Perso	on Listed H	las Solicited	l or Intends	to Solicit I	urchasers						
(Checl	k "All State	s" or check	k individual	States)							🗌 All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	{FL}	[GA]	{ HI }	{ ID }
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH] [TN]	[NJ] (TX)	[NM]	[NY] [VT]	[NC]	[ND] [WA]	[OH]	[OK] [WI]	[OR] [WY]	[PA]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 3 of 8

•	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 65,000,000	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$ 43,940,000
		\$	\$
		\$	\$ 43,940,000
	Answer also in appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 43,940,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		9
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the		
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure		\$
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$ \$ 2,500
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fee		
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fee	_	\$ 2,500
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fee	_	\$ 2,500 \$ 60,000
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fee Printing and Engraving Costs Legal Fees Accounting Fees		\$ 2,500 \$ 60,000 \$
	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fee Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees		\$ 2,500 \$ 60,000 \$

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C gross proceeds to the issuer."	- Question 4.a. This difference is the "adjusted		\$ 43,874,700
5. Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total gross proceeds to the issuer set forth in response to	y purpose is not known, furnish an estimate and of the payments listed must equal the adjusted	i	,
·		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		\$	\$
Purchase of real estate		\$	<u> </u>
Purchase, rental or leasing and installation of mac	hinery and equipment	\$	\$
Construction or leasing of plant buildings and fac-	ilities	\$	<u> </u>
Acquisition of other businesses (including the value offering that may be used in exchange for the asset pursuant to a merger)	ts or securities of another issuer	 	
			\$
Repayment of indebtedness	_	\$	\$ \$ \$2.874.700
Working capital		\$	\$ 43,874,700
Other (specify):		\$	\$
		\$	□ <u>\$</u>
Column Totals		\$	<u> </u>
Total Payments Listed (column totals added)		⊠ \$ 43	3,874,700
	D. DEDERAY GIGNATURE		
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any	ssuer to furnish to the U.S. Securities and Exchar	nge Commission, u	d under Rule 505, the apon written request of
Issuer (Print or Type)	Signature .	Date	
Partners for Growth II. L.P	Charle NIED	November	r 3, 2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Lorraine Nield	Manager, Partners for Growth II, LLC., the Ger	eral Partner	

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	
	presently subject to any of the disqualification provisi	
	See Appendix, Column 5, for state response.	
 The undersigned issuer hereby undertaked D (17 CFR 239.500) at such times as requ 	to furnish to any state administrator of any state in wired by state law.	which this notice is filed, a notice on Form
The undersigned issuer hereby undertakes to offerees.	to furnish to the state administrators, upon written re	quest, information furnished by the issuer
Limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that must be the state in which this notice is filed and understands using that these conditions have been satisfied.	
The issuer has read this notification and knundersigned duly authorized person:	ows the contents to be true and has duly caused thi	s notice to be signed on its behalf by the
Issuer (Print or Type)	Signature	Date
Partners for Growth II. L.P.	Louane Will	November 3, 2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Lorraine Nield	Manager Partners for Growth II, LLC, the	General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	3 4			T :	5		
	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item1)	†				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		х	22,440,000	24	22.44MM					
CO					<u></u>	·				
CT		х	600,000	1	600,000					
DE		Х	14,700,000	4	14.70MM					
DC										
FL										
GA										
HI										
ID		х	250,000	1	250,000		,			
IL										
_IN										
IA	}									
KS										
KY										
LA					· · · · · · · · · · · · · · · · · · ·					
ME										
MD			1.050.000							
MA		х	1,250,000	2	1.25MM					
MI										
MN								<u> </u>		
MS										
МО										

APPENDIX

1	2 3			4 5							
	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item1)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT							<u></u>				
NE											
NV											
NH											
NJ											
NM						-					
NY											
NC						·					
· ND											
ОН								j.			
ок											
OR											
PA											
RI											
SC											
SD				-							
TN											
TX		х	500,000	1	500,000						
UT											
VT		1									
VA		х	3,000,000	1	3.00MM						
WA		х	1,200,000	1	1.20MM						
wv											
WI											
WY											
PR											